

# **Application Data Sheet**

## **Application Information**

Application number::

Filing Date:: 10/03/03

Application Type:: Regular

Subject Matter::

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: IMPROVED METHOD FOR THE PRODUCTION  
OF BACTERIAL TOXINS

Attorney Docket Number:: 38777-0059

Request for Early Publication?::

Request for Non-Publication?::

Suggested Drawing Figure:: 1

Total Drawing Sheets:: 13

Small Entity?::

Latin name::

Variety denomination name::

Petition included?::

Petition Type::

Licensed US Govt. Agency::

Contractor Grant Numbers::

Secrecy Order in Parent Appl.?::

## **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	U.S.A.
Status::	Full Capacity
Given Name::	Milan
Middle Name::	S.
Family Name::	BLAKE
Name Suffix::	
City of Residence::	Fulton
State or Province of Residence::	Maryland
Country of Residence::	
Street of mailing address::	8521 Beaufort Drive
City of mailing address::	Fulton
State or Province of mailing address::	Maryland
Country of mailing address::	U.S.A.
Postal or Zip Code of mailing address::	20759

## **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	U.S.A.
Status::	Full Capacity
Given Name::	John
Middle Name::	A.
Family Name::	BOGDAN
Name Suffix::	Jr.
City of Residence::	Westminster
State or Province of Residence::	Maryland
Country of Residence::	
Street of mailing address::	357 Nectar Court
City of mailing address::	Westminster
State or Province of mailing address::	Maryland
Country of mailing address::	U.S.A.
Postal or Zip Code of mailing address::	21157

## **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	U.S.A.
Status::	Full Capacity
Given Name::	Javier
Middle Name::	
Family Name::	NAZARIO-LARRIEU
Name Suffix::	
City of Residence::	Rio Piedras
State or Province of Residence::	
Country of Residence::	Puerto Rico
Street of mailing address::	867 Ave. Munoz Rivera D-207 Cond. Vick Center
City of mailing address::	Rio Piedras
State or Province of mailing address::	
Country of mailing address::	Puerto Rico
Postal or Zip Code of mailing address::	00925

## Correspondence Information

Correspondence Customer Number:: 26633

Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

Phone number::

Fax Number:

E-Mail address::

## Representative Information

Representative Customer Number::	26633	
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- OR -

Representative Designation::	Registration Number::	Representative Name::
Primary	33,715	John P. Isacson
Primary	40,244	Patricia D. Granados
Primary	32,350	C. Joseph Faraci
Primary	35,170	Janice Guthrie

## Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Division of	09/825,770	04/04/01
Which is a	Non- Provisional of	60/194,482	04/04/00

## Assignee Information

Assignee name::	Baxter Healthcare S.A
Street of mailing address::	Hertistrasse 2
City of mailing address::	Wallisellen, Kanton Zurich
State or Province of mailing address::	
Country of mailing address::	Switzerland
Postal or Zip Code of mailing address::	CH-8306